

**Work Order ID 85986**

June-19-12 1:15:35 PM

**\*85986\***

Page 1

Item ID: D212-664-101TRN

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Crosstube Turning Detail

Stop

**\*NS2\***

Start Date: 19/06/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 03/07/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: MLJDate: 12/06/19

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D212-664-141	Rev D (DEO)

100 0.00

**\*100\***

MORI SEIKI CNC LATHE LARGE

Mori Seiki

Mori Seiki CNC Lathe Large

Memo 0.00

1-Fill tube with sand &amp; install plugs DT8534 on both ends as per Folio FA113

2-Turn first side as per Folio FA113

3-Blend transition lines only, \*\*do not sand whole tube\*\*

FOLIO REV: ADWG REV: D

\*Use mill bastard file, brush file repeatedly with file card.

\*Do not use sandpaper coarser than 320 grit.

110 QC1- Inspect dimensions to dimension sheet 0.00

**\*110\***

QC

Quality Control

Memo 0.00

1 6

mnl  
12/07/16

1 8

mnl  
12/07/16

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Page 2

Item ID: D212-664-101TRN

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Crosstube Turning Detail

Stop

**\*NS2\***Start Date: 19/06/2012 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 03/07/2012 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120		0.00							
<b>*120*</b>	MORI SEIKI CNC LATHE LARGE								
Mori Seiki	Memo	0.00							
Mori Seiki CNC Lathe Large	1-Turn second side as per Folio FA113								
	2-Blend transition lines only, **do not sand whole tube**: *Use mill bastard file, brush file repeatedly with file card. *Do not use sandpaper coarser than 320 grit.								
	FOLIO REV: <u>A</u>								
	DWG REV: <u>D</u>								
	3-Remove sand and plugs								
130	QC1- Inspect dimensions to dimension sheet	0.00							
<b>*130*</b>	Memo	0.00							
QC	+ PERFORM ULTRA SONIC MEASUREMENT								
Quality Control									

1 6  
12/07/16

1 0  
12/07/16

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	DISPOSITION			AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Engineering <input type="checkbox"/>		
NCR No. _____	Work Order Update <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Quality <input type="checkbox"/>		
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>				

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

## FAULT CATEGORY

Landing Gear	Hardware	General
Bending Passes Below Min	Breaking <input type="checkbox"/>	Burrs <input type="checkbox"/>
Centre Not Concentric to O/S	Missing <input type="checkbox"/>	Contamination <input type="checkbox"/>
Cracks <input type="checkbox"/>	Size/Length <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>
Crushed/Crimp at Bending	Spinning <input type="checkbox"/>	Documentation/Data <input type="checkbox"/>
Inspection Strip in Tube	Threading <input type="checkbox"/>	Finish <input type="checkbox"/>
Other	Wrong <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>
Positioned Wrong	Drill Holes	
Ripples on Inner Bend	Misaligned <input type="checkbox"/>	Inspection Unqualified <input type="checkbox"/>
Torque Waves in Extrusion	Ovalized <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>
Turning Sequence	Over/Undersized <input type="checkbox"/>	Jigs/Fixtures/Tooling <input type="checkbox"/>
Wave/Twist in Tube	Too Many <input type="checkbox"/>	Kit Incorrect <input type="checkbox"/>
		Kit Missing <input type="checkbox"/>
		Maintenance <input type="checkbox"/>
		Mislabeled <input type="checkbox"/>
		Off-Set <input type="checkbox"/>
		Orientation Misread <input type="checkbox"/>
		Out of Calibration <input type="checkbox"/>
		Out of Sequence <input type="checkbox"/>
		Outside Dimensions <input type="checkbox"/>
		Over/Under tolerance <input type="checkbox"/>
		Part Lost <input type="checkbox"/>
		Part Moved <input type="checkbox"/>
		Raw Material <input type="checkbox"/>
		Set-up <input type="checkbox"/>
		Supplier <input type="checkbox"/>
		Temperature/Cure <input type="checkbox"/>
		Weld <input type="checkbox"/>
		Wrong Stock Pulled <input type="checkbox"/>
		Other <input type="checkbox"/>

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Page 3

Item ID: D212-664-101TRN

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Crosstube Turning Detail

Stop

**\*NS2\***Start Date: 19/06/2012 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 03/07/2012 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	<b>*NR1*</b>
	QC:	Date:	SPC (Y/N):	Date:		Stop	<b>*NR2*</b>

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140 <b>*140*</b> QC	QC8- Inspect parts - second check	0.00							 12-7-17
Quality Control	Memo	0.00							
	+ CHECK ULTRA SONIC MEASUREMENT AND ORIENTATION FOR BENDING								
145 <b>*145*</b> Crosstubes	Memo	0.00							 12-7-18
Crosstubes	GRIND ONLY TRANSITION LINES SMOOTH LONGITUDE WAY.								
150 <b>*150*</b> HandFXtube	Crosstubes Chemical Conversion	0.00							 12-7-17
Hand Finishing Crosstubes	Memo	0.00							

1- Pressure Wash.  
JUL 07-18 2nd and Etch -

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	DISPOSITION				AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework	Skid-tube	Crosstube	Prod. Eng. Coor.	Engineering					
NCR No. _____	Scrap	Machining	Small Fab	Rec/Store/Packaging	Quality					
	Use-as-is	Thermoforming	Finishing	Supplier						
	Work Order Update	Large Fab	Composite	Other						

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

## FAULT CATEGORY

Landing Gear		Hardware	General		
<input type="checkbox"/>	Bending Passes Below Min	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Maintenance
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Set-up
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Supplier
<input type="checkbox"/>	Crushed/Crimp at Bending	<input type="checkbox"/>	Documentation/Data	<input type="checkbox"/>	Temperature/Cure
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Weld
<input type="checkbox"/>	Other	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Wrong Stock Pulled
<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	Inspection Unqualified	<input type="checkbox"/>	
<input type="checkbox"/>	Ripples on Inner Bend	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Jigs/Fixtures/Tooling	<input type="checkbox"/>	
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Kit Incorrect	<input type="checkbox"/>	
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Kit Missing	<input type="checkbox"/>	
Drill Holes					
<input type="checkbox"/>	Misaligned	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Ovalized	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Over/Undersized	<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	Too Many	<input type="checkbox"/>		<input type="checkbox"/>	

**Work Order ID 85986**

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Item ID: D212-664-101TRN

Accept

Revision ID:

Item Name: Crosstube Turning Detail

Start Date: 19/06/2012 Start Qty: 1.00 \*1\*

Required Date: 03/07/2012 Req'd Qty: 1.00 \*1\*

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:		Stop	*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160 <b>*160*</b> QC Quality Control	QC1-Inspect Chemical Conversion Coat <i>AM's</i> Memo	0.00							<i>DP</i> 12-7-18

170 <b>*170*</b> Packaging Packaging	Packaging Memo	0.00	<i>JW</i>	12-7-18
	Identify and Stock in kanban rack Location: <u>LC</u>			

180 <b>*180*</b> QC Quality Control	QC21- Final Inspection - Work Order Release Memo	0.00		
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*12/7/18 JJ*  
*MF*  
*12-07-18*

**\*85986\***

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**Picklist Print**

June-19-12 1:15:40 PM

Page 1

**Work Order ID:** 85986**Parent Item:** D212-664-101TRN**Parent Item Name:** Crosstube Turning Detail

**\*85986\***  
**\*D212-664-101TRN\***

**Start Date:** 19/06/2012**Required Date:** 03/07/2012**Start Qty:** 1.00**Required Qty:** 1.00

**Comments:**  
 IPP Rev:A 08-03-06 new issue DD verified by:ec  
 IPP Rev B 08.04.02 removed Polish EC verified by: DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6005-128		Manufactured	No			120	Each	20.0000	1	1			**

**\*D6005-128\***

Crosstube Material

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
LG	20	
	20	

69796

1 mm L 12/07/15

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b>				<b>AGAINST DEPARTMENT/PROCESS</b>				
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Engineering Quality <input type="checkbox"/>			
NCR No. _____	Use-as-is <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>			
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Other <input type="checkbox"/>				

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Offset/Setup									
Other									
Process									
Supplier									
Training									
Unauthorized									

## FAULT CATEGORY

<b>Landing Gear</b>		<b>Hardware</b>		<b>General</b>			
Bending Passes Below Min	<input type="checkbox"/>	Breaking <input type="checkbox"/>		Burrs <input type="checkbox"/>		Maintenance <input type="checkbox"/>	<input type="checkbox"/>
Centre Not Concentric to O/S	<input type="checkbox"/>	Missing <input type="checkbox"/>		Contamination <input type="checkbox"/>		Mislabeled <input type="checkbox"/>	<input type="checkbox"/>
Cracks <input type="checkbox"/>		Size/Length <input type="checkbox"/>		Cut Too Short <input type="checkbox"/>		Off-Set <input type="checkbox"/>	<input type="checkbox"/>
Crushed/Crimp at Bending <input type="checkbox"/>		Spinning <input type="checkbox"/>		Documentation/Data <input type="checkbox"/>		Orientation Misread <input type="checkbox"/>	<input type="checkbox"/>
Inspection Strip in Tube <input type="checkbox"/>		Threading <input type="checkbox"/>		Finish <input type="checkbox"/>		Out of Calibration <input type="checkbox"/>	<input type="checkbox"/>
Other <input type="checkbox"/>		Wrong <input type="checkbox"/>		Inspection Incomplete <input type="checkbox"/>		Out of Sequence <input type="checkbox"/>	<input type="checkbox"/>
Positioned Wrong <input type="checkbox"/>		<b>Drill Holes</b>		Inspection Unqualified <input type="checkbox"/>		Outside Dimensions <input type="checkbox"/>	<input type="checkbox"/>
Ripples on Inner Bend <input type="checkbox"/>		Misaligned <input type="checkbox"/>		Instructions Incomplete/Unclear <input type="checkbox"/>		Over/Under tolerance <input type="checkbox"/>	<input type="checkbox"/>
Torque Waves in Extrusion <input type="checkbox"/>		Ovalized <input type="checkbox"/>		Jigs/Fixtures/Tooling <input type="checkbox"/>		Part Lost <input type="checkbox"/>	<input type="checkbox"/>
Turning Sequence <input type="checkbox"/>		Over/Undersized <input type="checkbox"/>		Kit Incorrect <input type="checkbox"/>		Part Moved <input type="checkbox"/>	<input type="checkbox"/>
Wave/Twist in Tube <input type="checkbox"/>		Too Many <input type="checkbox"/>		Kit Missing <input type="checkbox"/>		Raw Material <input type="checkbox"/>	<input type="checkbox"/>

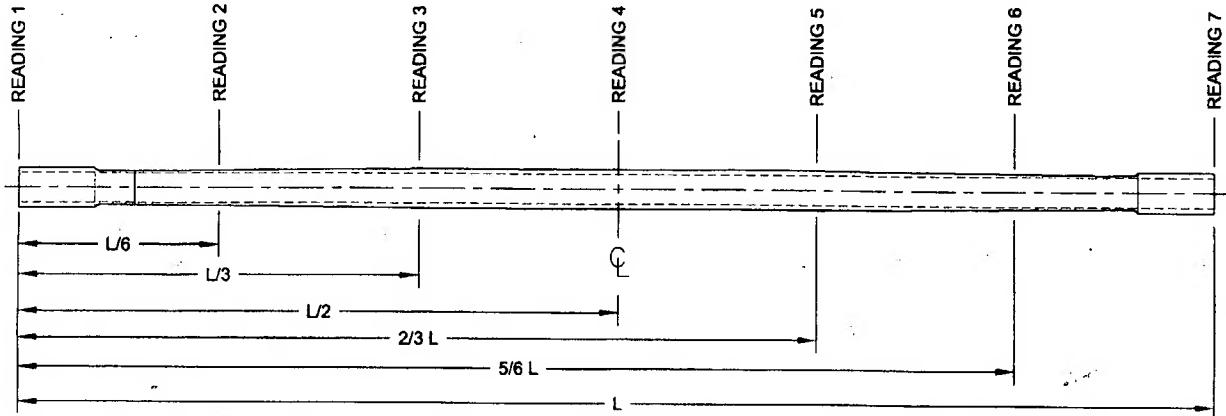
DART AEROSPACE LTD	Work Order:	85986
Description: Crosstube Assembly (205/212/412 High Fwd)	Part Number:	D212-664-141
Inspection Dwg: D212-664-141 Rev: D		Page 1 of 2

### FIRST ARTICLE INSPECTION CHECKLIST

Inspection Sheet Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
SIDE A	0.200	+/-0.010	200	—	vern	CNC-08
	R0.063	+/-0.010	.063	—	RG	
	2.740	+0.005/-0.000	2.740	—	vern	CNC-08
	5.097	+/-0.030	5.097	—		
	2.304	+0.005/-0.000	2.309	/		
	2.340	+0.005/-0.000	2.342	/		
	2.398	+0.005/-0.000	2.402	/		
	2.448	+0.005/-0.000	2.452	/		
	2.498	+0.005/-0.000	2.502	/		
	2.549	+0.005/-0.000	2.553	/		
	2.599	+0.005/-0.000	2.602	/		
	2.671	+0.005/-0.000	2.674	/		
	2.701	+0.005/-0.000	2.701	/		
SIDE B	0.200	+/-0.010	200	—	vern	CNC-08
	R0.063	+/-0.010	.063	—	RG	
	2.740	+0.005/-0.000	2.740	—	vern	CNC-08
	5.097	+/-0.030	5.097	—		
	2.304	+0.005/-0.000	2.309	—		
	2.340	+0.005/-0.000	2.343	/		
	2.398	+0.005/-0.000	2.403	/		
	2.448	+0.005/-0.000	2.453	/		
	2.498	+0.005/-0.000	2.502	/		
	2.549	+0.005/-0.000	2.553	/		
	2.599	+0.005/-0.000	2.603	/		
	2.671	+0.005/-0.000	2.673	/		
	2.701	+0.005/-0.000	2.701	/		
	126.514	+/-0.020	126.514	/	tape	LG-22

DART AEROSPACE LTD	Work Order:	85986
Description: Crosstube Assembly (205/212/412 High Fwd)	Part Number:	D212-664-141
Inspection Dwg: D212-664-141 Rev: D		Page 2 of 2

### WALL THICKNESS MEASUREMENT



Location	WALL THICKNESS MEASUREMENT (IN)				Deviation $\Delta w$ (max-min)	TOLERANCE
	w1	w2	w3	w4		
READING 1 L= 0"	.379	.386	.383	.376	.01	
READING 2 L= 15	.206	.222	.218	.204	.018	
READING 3 L= 31	.287	.312	.307	.285	.027	
READING 4 L= 63	.373	.376	.395	.390	.022	0.048"
READING 5 L= 31	.276	.336	.316	.267	.069	OK, ORIENT WITH 0.267 DIM
READING 6 L= 15	.194	.239	.227	.193	.047	UP/DOWN IN BENDER.
READING 7 L=cuff	.368	.381	.394	.381	.026	Dwg = 0.285" P 12.02.16

#### Calibration Result

Actual Block Thickness: 0.285

Sitescan 250 Measured Thickness: 0.283

Measured by:	<u>gmn-l</u>	Audited by:	<u>D</u>	Preliminary Approval:	
Date:	<u>12/07/16</u>	Date:	<u>12-7-17</u>	Date:	

Rev	Date	Change	Revised by	Approved
A	05.04.27	New Issue (P/O D412-664-101)	KJ/JLM	
B	06.03.15	Tolerance revised for 5.097 per Dwg Rev update	KJ/JLM	
C	07.05.28	Dwg Rev updated	KJ/JLM	
D	10.02.02	Dimension 126.514 was 126.51	KJ	
E	12.06.04	Wall thickness form added	KJ	<u>M</u>

Item	Qty -141	Qty -141B	Part Number	Description
1	X		D212-664-141	CROSSTUBE ASSEMBLY (205/212/412 HIGH FWD)
2		X	D212-664-141B	CROSSTUBE ASSEMBLY (214 HIGH FWD)
3	1	1	D6005-128	CROSSTUBE
4	2	2	D2893-1	SUPPORT
5	4	4	D3595-063-450	RUBBER CUSHION
6	4	4	MS21920-25	CLAMP (OR MS21920-26)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6005-128  
FINISHED LENGTH = 126.514±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF  
USING VIBRATING STYLUS
- 7) WEIGHT: D212-664-141 = 33.6 lbs (PER IIN-D212-664)  
D212-664-141B = 33.6 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 3 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-25 CLAMPS (OR -26) WITH D3595-063-450 RUBBER CUSHIONS TO SECURE THE D2893-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY

RETURN TO

ENGINEERING

UNCONTROLLED COPY

SUBJECT TO AMENDMENT

WITHOUT NOTICE

WORK ORDER

NO. 05986 MLJ

12/06/19

REMOVED FROM UNDER REVIEW 9/22  
UNDER REVIEW EGN 411-614

01/06/13 01/09/26

FOR PAY-SEALING SUPPORT

DEO ATTACHED

RELEASED  
2009-10-29  
M

D	REFORMAT/REVISE GENERAL NOTES/PART LIST; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD-141B (ZN B4-2, D4-2); REMOVED REF & ADD TOLERANCES (ZN B4-3, C6-3, C8-3 & B6-3); RELOCATED FLAG #6 PER PAR 08-046 (ZN A5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE, TO SHEET 4	RF	09.09.30
C	REMOVE -851 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	<u>PH</u>	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<u>PH</u>	DRAWING NO.	REV. D
MFG. APPR.	<u>DA</u>	D212-664-141	SHEET 1 OF 4
APPROVED	<u>DA</u>	TITLE	SCALE
DE APPR.	<u>DA</u>	XTUBE ASS'Y (205/212/412 HI FWD)	NTS
DATE	09.09.30	COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

8 . . . . . 7 . . . . . 6 . . . . . 5 . . . . . 4 . . . . . 3 . . . . . 2 . . . . . 1 . . . . .

D

1

6

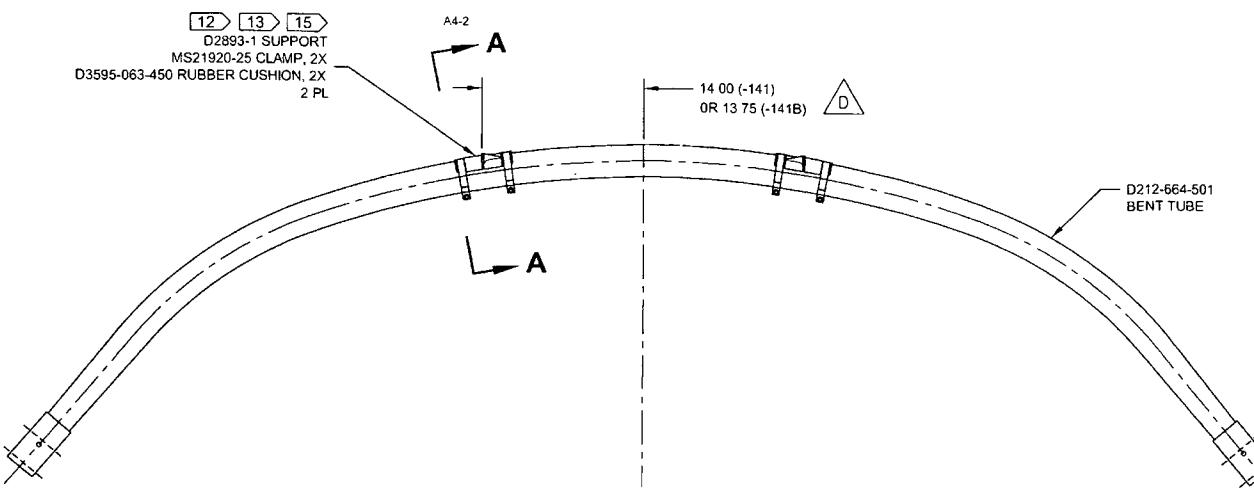
1

B

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A

A



9598k

~~UNDER REVIEW~~

DEO ATTACHED

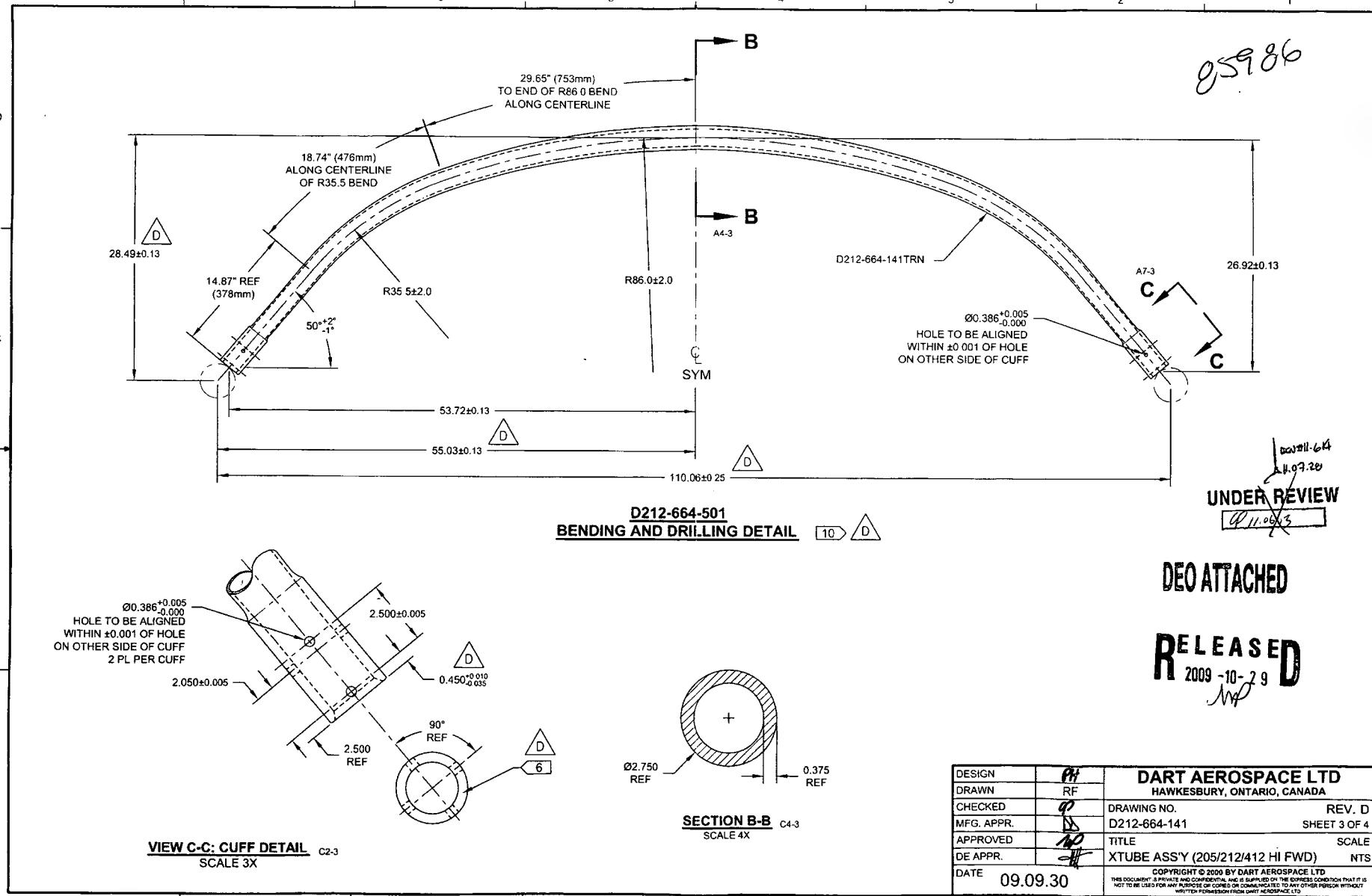
RELEASED  
2009-10-29

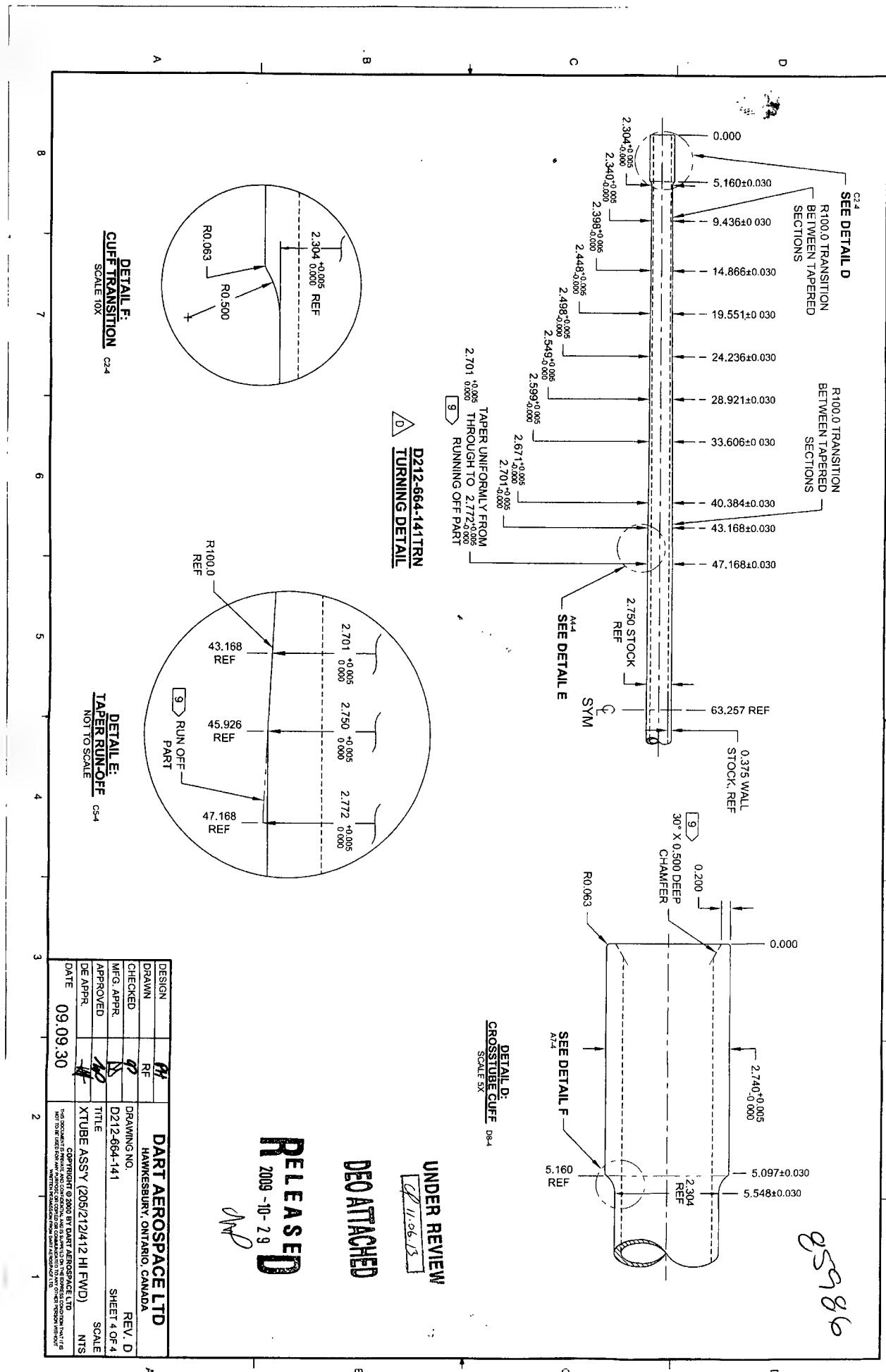
The diagram shows a cross-section of a flange assembly. A callout labeled '12' points to the text 'APPLY MAGNOBOND BETWEEN D2893-1 AND CROSSTUBE'. Another callout labeled '13' points to the text 'D3595-063-450 RUBBER CUSHION UNDER CLAMP, REF MS21920-25'.

**SECTION A-A** D5-2  
SCALE 4X

DESIGN	PH	DART AEROSPACE LTD		
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA		
CHECKED	99	DRAWING NO.	REV. D	
MFG. APPR.	DA	D212-664-141	SHEET 2 OF 4	
APPROVED	100	TITLE	SCALE	
DE APPR.	<del>100</del>	XTUBE ASSY (205/212/412 HI FWD)	NTS	
DATE	09.09.30	COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED OR COPIED BY ANYONE OTHER THAN THE INDIVIDUAL OR PERSON TO WHOM IT IS WRITTEN. PERMISSION FROM DART AEROSPACE LTD		

WRITTEN PERMISSION FROM DART AEROSPACE





8598

85986

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED <i>RP</i>	MFG. APPR. <i>ER</i>	APPROVED <i>MP</i>	DE APPR. <i>MM</i>		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12	DATE 11.04.12	

PURPOSE:

ADD AN INSPECTION WINDOW TO UNDERSIDE OF CROSSTUBE.

CHANGE:

NOTES 2 OF SHEET 1 IS AMENDED AS FOLLOWS:

IS:

2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
 PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
 MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
 PAINT OUTSIDE PER DART QSI 005 4.2  
 REMOVE MASKING AND APPLY CLEAR COAT

WAS:

2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
 PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
 PAINT OUTSIDE PER DART QSI 005 4.2

RELEASED  
2011-04-18  
*MM*UNDER REVIEW  
*RP 06.13*  
*DCS 11-664*  
*11.07.28*

85986

DRAWING NO. D212-664-141	TITLE XTUBE ASSY (205/212/412 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-141-D-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN DATE 11.04.07	CHECKED <i>CP</i> DATE 11.04.11	MFG. APPR. <i>E</i> DATE 11.04.12	APPROVED <i>WAD</i> DATE 11/04/12	DE APPR. <i>WAD</i> DATE 11.04.12		

UNDER REVIEW

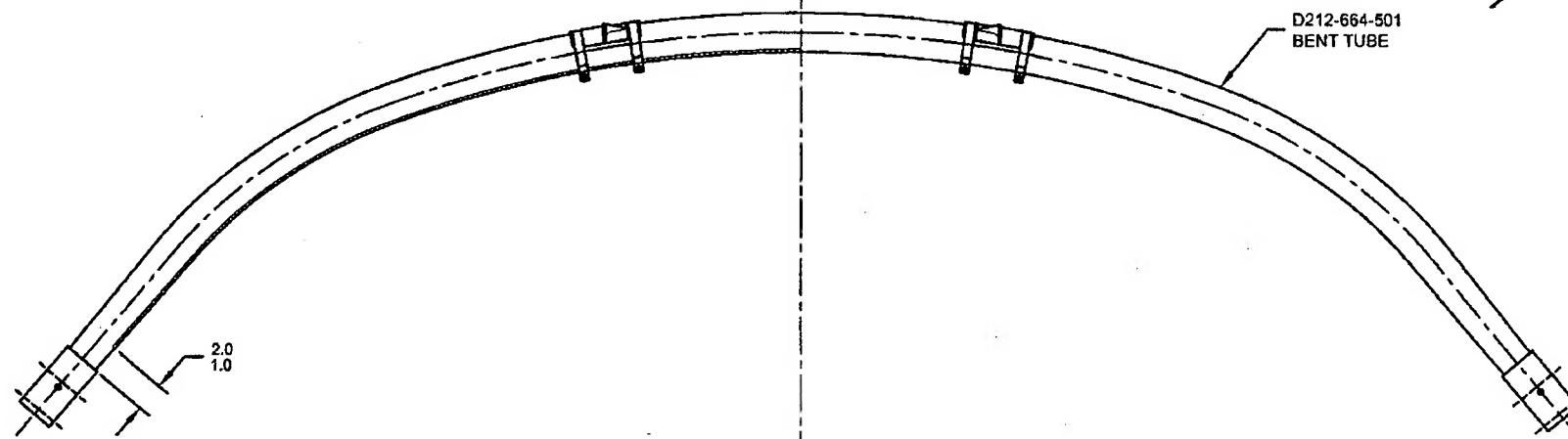
97/11/06/13

ECN#11-614

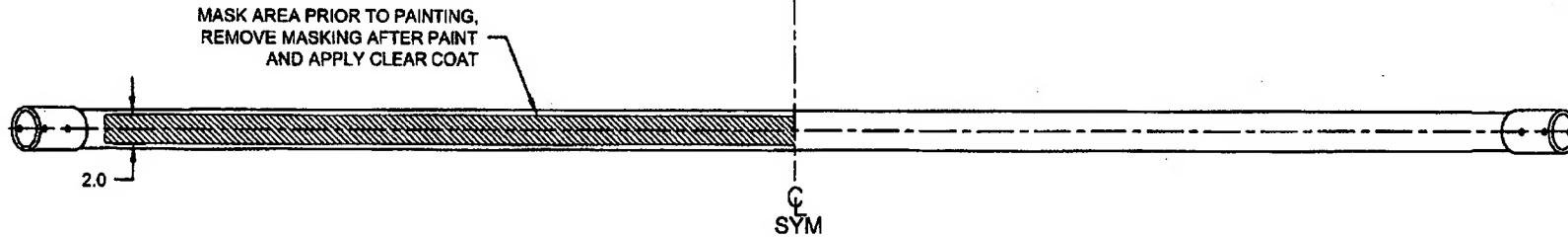
11.07.28

IS:

WAS:



**D212-664-141/141B**  
**ASSEMBLY DETAIL**



859 96

DRAWING NO. D212-664-141	TITLE CROSSTUBE ASS'Y (205 HI FWD)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-141-D-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN <i>DP</i>	CHECKED <i>ADS</i>	MFG. APPR. <i>DP</i>	APPROVED <i>MD</i>	DE APPR. <i>MM</i>		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11.07.21	DATE 11.07.21	DATE 11.07.21	

**PURPOSE:**  
REPLACE MAGNOBOND WITH PROSEAL.

**CHANGE:**

**IS:**

Item	Qty -141	Qty -141B	Part Number	Description
7	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

**WAS:**

7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
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NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

**IS:**

- 12) TO INSTALL D2893-1 SUPPORT: ABRADE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.

**WAS:**

- 12) INSTALL D2893-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2893-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

RELEASER  
2011-01-18  
MM

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